

By: Moody

To: Public Health and
Welfare;
Appropriations

HOUSE BILL NO. 1054

1 AN ACT TO AMEND SECTION 43-13-115, MISSISSIPPI CODE OF 1972,
2 TO AUTHORIZE PERSONS WHO ARE WORKERS WITH A POTENTIALLY SEVERE
3 DISABILITY TO PURCHASE MEDICAID COVERAGE; TO PROVIDE THAT THE
4 ELIGIBILITY OF THOSE PERSONS SHALL BE CONDUCTED AS A DEMONSTRATION
5 PROJECT; TO DIRECT THE DIVISION OF MEDICAID TO APPLY FOR A FEDERAL
6 WAIVER TO ALLOW FOR THE IMPLEMENTATION OF THE PRECEDING
7 PROVISIONS; AND FOR RELATED PURPOSES.

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

9 SECTION 1. Section 43-13-115, Mississippi Code of 1972, is
10 amended as follows:[RF1]

11 43-13-115. Recipients of medical assistance shall be the
12 following persons only:

13 (1) Who are qualified for public assistance grants
14 under provisions of Title IV-A and E of the federal Social
15 Security Act, as amended, including those statutorily deemed to be
16 IV-A as determined by the State Department of Human Services and
17 certified to the Division of Medicaid, but not optional groups
18 unless otherwise specifically covered in this section. For the
19 purposes of this paragraph (1) and paragraphs (3), (4), (8), (14),
20 (17) and (18) of this section, any reference to Title IV-A or to
21 Part A of Title IV of the federal Social Security Act, as amended,
22 or the state plan under Title IV-A or Part A of Title IV, shall be
23 considered as a reference to Title IV-A of the federal Social
24 Security Act, as amended, and the state plan under Title IV-A,
25 including the income and resource standards and methodologies
26 under Title IV-A and the state plan, as they existed on July 16,
27 1996.

28 (2) Those qualified for Supplemental Security Income

29 (SSI) benefits under Title XVI of the federal Social Security Act,
30 as amended. The eligibility of individuals covered in this
31 paragraph shall be determined by the Social Security
32 Administration and certified to the Division of Medicaid.

33 (3) Qualified pregnant women as defined in Section
34 1905(n) of the federal Social Security Act, as amended, and as
35 determined to be eligible by the State Department of Human
36 Services and certified to the Division of Medicaid, who:

37 (a) Would be eligible for assistance under Part A
38 of Title IV (or would be eligible for such assistance if coverage
39 under the state plan under Part A of Title IV included assistance
40 pursuant to Section 407 of Title IV-A of the federal Social
41 Security Act, as amended) if her child had been born and was
42 living with her in the month such assistance would be paid, and
43 such pregnancy has been medically verified; or

44 (b) Is a member of a family which would be
45 eligible for assistance under the state plan under Part A of Title
46 IV of the federal Social Security Act, as amended, pursuant to
47 Section 407 if the plan required the payment of assistance
48 pursuant to such section.

49 (4) Qualified children who are under five (5) years of
50 age, who were born after September 30, 1983, and who meet the
51 income and resource requirements of the state plan under Part A of
52 Title IV of the federal Social Security Act, as amended. The
53 eligibility of individuals covered in this paragraph shall be
54 determined by the State Department of Human Services and certified
55 to the Division of Medicaid.

56 (5) A child born on or after October 1, 1984, to a
57 woman eligible for and receiving medical assistance under the
58 state plan on the date of the child's birth shall be deemed to
59 have applied for medical assistance and to have been found
60 eligible for such assistance under such plan on the date of such
61 birth and will remain eligible for such assistance for a period of

62 one (1) year so long as the child is a member of the woman's
63 household and the woman remains eligible for such assistance or
64 would be eligible for assistance if pregnant. The eligibility of
65 individuals covered in this paragraph shall be determined by the
66 State Department of Human Services and certified to the Division
67 of Medicaid.

68 (6) Children certified by the State Department of Human
69 Services to the Division of Medicaid of whom the state and county
70 human services agency has custody and financial responsibility,
71 and children who are in adoptions subsidized in full or part by
72 the Department of Human Services, who are approvable under Title
73 XIX of the Medicaid program.

74 (7) (a) Persons certified by the Division of Medicaid
75 who are patients in a medical facility (nursing home, hospital,
76 tuberculosis sanatorium or institution for treatment of mental
77 diseases), and who, except for the fact that they are patients in
78 such medical facility, would qualify for grants under Title IV,
79 supplementary security income benefits under Title XVI or state
80 supplements, and those aged, blind and disabled persons who would
81 not be eligible for supplemental security income benefits under
82 Title XVI or state supplements if they were not institutionalized
83 in a medical facility but whose income is below the maximum
84 standard set by the Division of Medicaid, which standard shall not
85 exceed that prescribed by federal regulation;

86 (b) Individuals who have elected to receive
87 hospice care benefits and who are eligible using the same criteria
88 and special income limits as those in institutions as described in
89 subparagraph (a) of this paragraph (7).

90 (8) Children under eighteen (18) years of age and
91 pregnant women (including those in intact families) who meet the
92 financial standards of the state plan approved under Title IV-A of
93 the federal Social Security Act, as amended. The eligibility of
94 children covered under this paragraph shall be determined by the

95 State Department of Human Services and certified to the Division
96 of Medicaid.

97 (9) Individuals who are:

98 (a) Children born after September 30, 1983, who
99 have not attained the age of nineteen (19), with family income
100 that does not exceed one hundred percent (100%) of the nonfarm
101 official poverty line;

102 (b) Pregnant women, infants and children who have
103 not attained the age of six (6), with family income that does not
104 exceed one hundred thirty-three percent (133%) of the federal
105 poverty level; and

106 (c) Pregnant women and infants who have not
107 attained the age of one (1), with family income that does not
108 exceed one hundred eighty-five percent (185%) of the federal
109 poverty level.

110 The eligibility of individuals covered in (a), (b) and (c) of
111 this paragraph shall be determined by the Department of Human
112 Services.

113 (10) Certain disabled children age eighteen (18) or
114 under who are living at home, who would be eligible, if in a
115 medical institution, for SSI or a state supplemental payment under
116 Title XVI of the federal Social Security Act, as amended, and
117 therefore for Medicaid under the plan, and for whom the state has
118 made a determination as required under Section 1902(e) (3) (b) of
119 the federal Social Security Act, as amended. The eligibility of
120 individuals under this paragraph shall be determined by the
121 Division of Medicaid.

122 (11) Individuals who are sixty-five (65) years of age
123 or older or are disabled as determined under Section 1614(a) (3)
124 of the federal Social Security Act, as amended, and who meet the
125 following criteria:

126 (a) Whose income does not exceed one hundred
127 percent (100%) of the nonfarm official poverty line as defined by

128 the Office of Management and Budget and revised annually.

129 (b) Whose resources do not exceed those allowed
130 under the Supplemental Security Income (SSI) program.

131 The eligibility of individuals covered under this paragraph
132 shall be determined by the Division of Medicaid, and such
133 individuals determined eligible shall receive the same Medicaid
134 services as other categorical eligible individuals.

135 (12) Individuals who are qualified Medicare
136 beneficiaries (QMB) entitled to Part A Medicare as defined under
137 Section 301, Public Law 100-360, known as the Medicare
138 Catastrophic Coverage Act of 1988, and who meet the following
139 criteria:

140 (a) Whose income does not exceed one hundred
141 percent (100%) of the nonfarm official poverty line as defined by
142 the Office of Management and Budget and revised annually.

143 (b) Whose resources do not exceed two hundred
144 percent (200%) of the amount allowed under the Supplemental
145 Security Income (SSI) program as more fully prescribed under
146 Section 301, Public Law 100-360.

147 The eligibility of individuals covered under this paragraph
148 shall be determined by the Division of Medicaid, and such
149 individuals determined eligible shall receive Medicare
150 cost-sharing expenses only as more fully defined by the Medicare
151 Catastrophic Coverage Act of 1988.

152 (13) Individuals who are entitled to Medicare Part B as
153 defined in Section 4501 of the Omnibus Budget Reconciliation Act
154 of 1990, and who meet the following criteria:

155 (a) Whose income does not exceed the percentage of
156 the nonfarm official poverty line as defined by the Office of
157 Management and Budget and revised annually which, on or after:

158 (i) January 1, 1993, is one hundred ten
159 percent (110%); and

160 (ii) January 1, 1995, is one hundred twenty

161 percent (120%).

162 (b) Whose resources do not exceed two hundred
163 percent (200%) of the amount allowed under the Supplemental
164 Security Income (SSI) program as described in Section 301 of the
165 Medicare Catastrophic Coverage Act of 1988.

166 The eligibility of individuals covered under this paragraph
167 shall be determined by the Division of Medicaid, and such
168 individuals determined eligible shall receive Medicare cost
169 sharing.

170 (14) Individuals in families who would be eligible for
171 the unemployed parent program under Section 407 of Title IV-A of
172 the federal Social Security Act, as amended, but do not receive
173 payments pursuant to that section. The eligibility of individuals
174 covered in this paragraph shall be determined by the Department of
175 Human Services.

176 (15) Disabled workers who are eligible to enroll in
177 Part A Medicare as required by Public Law 101-239, known as the
178 Omnibus Budget Reconciliation Act of 1989, and whose income does
179 not exceed two hundred percent (200%) of the federal poverty level
180 as determined in accordance with the Supplemental Security Income
181 (SSI) program. The eligibility of individuals covered under this
182 paragraph shall be determined by the Division of Medicaid and such
183 individuals shall be entitled to buy-in coverage of Medicare Part
184 A premiums only under the provisions of this paragraph (15).

185 (16) In accordance with the terms and conditions of
186 approved Title XIX waiver from the United States Department of
187 Health and Human Services, persons provided home- and
188 community-based services who are physically disabled and certified
189 by the Division of Medicaid as eligible due to applying the income
190 and deeming requirements as if they were institutionalized.

191 (17) In accordance with the terms of the federal
192 Personal Responsibility and Work Opportunity Reconciliation Act of
193 1996 (Public Law 104-193), persons who become ineligible for

194 assistance under Title IV-A of the federal Social Security Act, as
195 amended, because of increased income from or hours of employment
196 of the caretaker relative or because of the expiration of the
197 applicable earned income disregards, who were eligible for
198 Medicaid for at least three (3) of the six (6) months preceding
199 the month in which such ineligibility begins, shall be eligible
200 for Medicaid assistance for up to twenty-four (24) months;
201 however, Medicaid assistance for more than twelve (12) months may
202 be provided only if a federal waiver is obtained to provide such
203 assistance for more than twelve (12) months and federal and state
204 funds are available to provide such assistance.

205 (18) Persons who become ineligible for assistance under
206 Title IV-A of the federal Social Security Act, as amended, as a
207 result, in whole or in part, of the collection or increased
208 collection of child or spousal support under Title IV-D of the
209 federal Social Security Act, as amended, who were eligible for
210 Medicaid for at least three (3) of the six (6) months immediately
211 preceding the month in which such ineligibility begins, shall be
212 eligible for Medicaid for an additional four (4) months beginning
213 with the month in which such ineligibility begins.

214 (19) Disabled workers, whose incomes are above the
215 Medicaid eligibility limits, but below two hundred fifty percent
216 (250%) of the federal poverty level, shall be allowed to purchase
217 Medicaid coverage on a sliding fee scale developed by the Division
218 of Medicaid.

219 (20) Persons who are workers with a potentially severe
220 disability, as determined by the division, shall be allowed to
221 purchase Medicaid coverage. The term "worker with a potentially
222 severe disability" means a person who is at least sixteen (16)
223 years of age but under sixty-five (65) years of age, who has a
224 physical or mental impairment that is reasonably expected to cause
225 the person to become blind or disabled as defined under Section
226 1614(a) of the federal Social Security Act, as amended, if the

227 person does not receive items and services provided under
228 Medicaid.

229 The eligibility of persons under this paragraph (20) shall be
230 conducted as a demonstration project that is consistent with
231 Section 204 of the Ticket to Work and Work Incentives Improvement
232 Act of 1999, Public Law 106-170, for a certain number of persons
233 as specified by the division. The eligibility of individuals
234 covered under this paragraph (20) shall be determined by the
235 Division of Medicaid.

236 The Division of Medicaid shall apply to the United States
237 Secretary of Health and Human Services for a federal waiver of the
238 applicable provisions of Title XIX of the federal Social Security
239 Act, as amended, and any other applicable provisions of federal
240 law as necessary to allow for the implementation of this paragraph
241 (20). The provisions of this paragraph (20) shall be implemented
242 from and after the date that the Division of Medicaid receives the
243 federal waiver.

244 SECTION 2. This act shall take effect and be in force from
245 and after July 1, 2000.